PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

101584,723

CLAIMS AS FILED - PART I								SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
119	NATIONAL S	TAGE FEES	(Column 1)		(C	(Column 2)		RATE	FEE		RATE	FEE
	C FEE	77.02 1 220	SMALL ENT. = \$ 150		LARGI	ENT. = \$ 300		BASIC FEE		OR	BASIC FEE	2(1)
			Satisfies PCT Arti	cle 33(1)-	All oth	er situations =		EXAM. FEE			EXAM. FEE	300
EXA	MINATION FEE		(4) = \$50 / U.S. is ISA = \$5			100 / \$ 200 ner situations =						<i>2</i> 00
SEAF	RCH FEE		ALL other countries = \$ 200 / \$ 400			250 / \$ 500		SEARCH FEE			SEARCH FEE	400
FEE	FOR EXTRA SI	PEC. PGS.	minus 100 =			/ 50 =		X \$ 125 =			X \$ 250 =	
тот	AL CHARGEAB	LE CLAIMS	minus 20 =		*			X \$ 25 =		OR	X \$ 50 =	
INDE	PENDENT CLA	NIMS	/ mi	nus 3 =	*			X \$ 100 =		OR	X \$ 200 =	
MUL.	TIPLE DEPEND	ENT CLAIM PRE	SENT					+ \$ 180 =		OR	+ \$ 360 =	
* If the difference in column 1 is less than zero, enter "0" in column 2							_	TOTAL		OR	TOTAL	900
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
AMENDMENT A	L)	CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* 11	Minus	** 20	5	- Ø		X \$ 25 =		OR	X \$ 50 =	
	Independent	* (Minus	···3		- O		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(0.1 1)		(Calu	2\	(Column 3)						
NT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	mn 2) HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDME	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =	
	Independent	*	Minus	***		=	1	`X \$ 100 =		OR	X \$ 200 =	
`	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	+ \$ 180 =		OR	+ \$ 360 =	
			_	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE					
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. Barbara Campbell, PCT National Stage Division ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												